FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1 (See instructions)		Office use only		
NAME OF COMMITTEE (in the community of the community	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5	
Mary's Politica	I Action Committee		1 1 1 1 1 1 1	
ADDRESS (number and s	1155 21st Street, N	w		
(Check if addre	Suite 300		111111	
is changed)	Washington		DC 2	0036
COMMITTEE'S E-MAI	L ADDRESS	CITY▲	STATE▲	ZIP CODE 📥
COMMITTEE'S WEB	PAGE ADDRESS (URL)			
COMMITTEE'S FAX N	UMBER			
2. DATE 0 4	/ D D / Y Y Y Y Y 18			
3. FEC IDENTIFICA	TION NUMBER	C C00365338		
4. IS THIS STATEM	ENT X NEW (N) OR	AMENDED (A)		
I certify that I have exami	ned this Statement and to the best of my kr	nowledge and belief it is true, correct ar	nd complete	
Type or Print Name of	Treasurer Meredith G. Ke	lley		
Signature of Treasurer	Electronically Filed by Meredith	G. Kelley	Date 04 / D	18 / Y Y Y Y Y Y Y Y
NOTE: Submission of fal	se, erroneous, or incomplete information m	ay subject the person signing this Stat	•	J.S.C. S437g.
Office Use Only		For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100	sion FE	EC FORM 1 evised 02/2003)

	FECForm 1 (Revised 02/2003)	Page 2		
5.	TYPE OF COMMITTEE (Check One)			
	(a) This committee is a principal campaign committee. (Complete the candidate information below.)			
	(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the car information below.)	ndidate		
	Name of Candidate			
	Party Affiliation Sought: House Senate President	State District		
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.				
	Name of Candidate			
		nocratic, ublican,etc.) Party.		
	(e) This committee is a separate segregated fund			
	(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated function committee.	d or party		
6.	Name of Any Connected Organization or Affiliated Committee			
l	NONE	.		
 		.		
	Mailing Address			
	1			
	CITY▲ STATE A ZI	IP CODE A		
	Relationship			
	Type of Connected Organization:			
	Corporation Corporation w/o Capital Stock Labor Organization	١		
	Membership Organization Trade Association Cooperative			

FEC Form 1 (Revised 02/20	03)		Page 3
Write or Type Committee Name			
Mary's Political Action Cor	mmittee		
 Custodian of Records: Identif possession of Committee boo 		ber optional), and position of th	ne person in
Full Name			
Mailing Address			
_			
Title or Position ♥	CITY A	STATE▲	ZIP CODE A
		Telephone number	
name and address of any des	signated agent (e.g., assistant tre	nal) of the treasurer of the commi asurer).	ttee; and the
of Treasurer Meredith (G. Kelley		
Mailing Address	1155 21st Street, NW		
-	Washington		20036
Title or Position ♥	CITY A	STATE▲	ZIP CODE A
Treasurer		Telephone number	973 5938
Full Name of Designated Agent			
Mailing Address			
_			
Title or Position ♥	CITY A	STATE A	ZIP CODE A
		Telephone number	

	FEC Form 1 (Revise	ed 02/2003) P	Page 4	_					
9.	Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.								
Name of Bank, Depository, etc.									
	Wa	nchovia							
	Mailing Address	P.O. Box 13327							
		Roanoke	-						

STATE ∠

ZIP CODE △

CITY 🛆